

Name of study subject: \_\_\_\_\_

ID #: \_\_\_\_\_

Respondent: \_\_\_\_\_

Date: \_\_\_\_\_

Relationship to study subject: \_\_\_\_\_

## ACE Family Medical History

**Instructions:**

1. To be completed by the study subject's primary caregiver.
2. Do not include the study subject in responses about biological siblings.
3. Please indicate if relative has a given condition by writing "yes" or placing a check in the box.

	Biological Mother	Biological Father	Biological Siblings				
			(Page 1 only: Circle corresponding symbol for each sibling)				
			● Full   ◐ Maternal half   ◑ Paternal half				
			Sibling 1	Sibling 2	Sibling 3	Sibling 4	Sibling 5
			● ◐ ◑	● ◐ ◑	● ◐ ◑	● ◐ ◑	● ◐ ◑
Current age (months)							
Sex: Male (M) or Female (F)	F	M					
Last Grade Completed							
<b>NEURODEVELOPMENTAL DISORDERS</b>							
1. Autism Spectrum Disorder							
2. Autistic Disorder							
3. Asperger Syndrome							
4. Rett Syndrome							
5. PDD-NOS (Pervasive Developmental Disorder- Not Otherwise Specified)							

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			Sibling 1	Sibling 2	Sibling 3	Sibling 4	Sibling 5
			● ◐ ◑	● ◐ ◑	● ◐ ◑	● ◐ ◑	● ◐ ◑
6. History of or currently has Speech/Language Delay							
7. History of or currently has Developmental Delay							
8. History of or currently has Learning Disability							
9. Seizure disorder/Epilepsy							
10. Cerebral Palsy							
11. Down Syndrome							
12. Intellectual Disability/Mental Retardation							
13. Tuberous Sclerosis Complex							
14. Fragile X syndrome							
15. Neurofibromatosis I							
<b>SENSORY</b>							
16. Congenital Blindness							
17. Hearing impairment/deafness							

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			Sibling 1	Sibling 2	Sibling 3	Sibling 4	Sibling 5
			● ◐ ◑	● ◐ ◑	● ◐ ◑	● ◐ ◑	● ◐ ◑
a. Hearing corrected with hearing aid(s) or cochlear implant?							
<b>MENTAL HEALTH</b>							
18. Bipolar disorder (Manic/depression)							
19. Depression							
20. Anxiety disorder							
21. Obsessive compulsive disorder							
22. Schizophrenia							
23. Self-injuring behavior							
24. Attention deficit hyperactivity disorder (ADHD)							
25. Eating disorder: Bulimia, Anorexia, or other.							
26. Disrupted sleep patterns							
27. Tourette Syndrome							